Clinical Manifestations of Dengue and Dengue Hemorrhagic Fever



Dengue Clinical Syndromes

- Undifferentiated fever
- Classic dengue fever
- Dengue hemorrhagic fever (DHF)
- Dengue shock syndrome (DSS)



Undifferentiated Fever

- May be the most common manifestation of dengue
- Prospective study found that 87% of students infected were either asymptomatic or only mildly symptomatic
- Other prospective studies including all agegroups also demonstrate silent transmission



Clinical Characteristics of Dengue Fever

- Fever
- Headache
- Muscle and joint pain
- Nausea/vomiting
- Rash
- Hemorrhagic manifestations



Signs and Symptoms of Encephalitis/Encephalopathy Associated with Dengue Infection

- Decreased level of consciousness: lethargy, confusion, coma
- Seizures
- Nuchal rigidity
- Paresis



Hemorrhagic Manifestations of Dengue

- Skin hemorrhages: petechiae, purpura, ecchymoses
- Gingival bleeding
- Nasal bleeding
- Gastro-intestinal bleeding: hematemesis, melena, hematochezia
- Hematuria
- Increased menstrual flow



Clinical Case Definition for Dengue Hemorrhagic Fever 4 Necessary Criteria:

- Fever, or recent history of acute fever
- Hemorrhagic manifestations
- Low platelet count (100,000/mm³ or less)
- Objective evidence of "leaky capillaries:"
 - elevated hematocrit (20% or more over baseline)
 - low albumin
 - pleural or other effusions



Clinical Case Definition for Dengue Shock Syndrome

- 4 criteria for DHF
- Evidence of circulatory failure manifested indirectly by all of the following:
 - Rapid and weak pulse
 - Narrow pulse pressure (≤ 20 mm Hg) or hypotension for age
 - Cold, clammy skin and altered mental status
- Frank shock is direct evidence of circulatory failure



Four Grades of DHF

- Grade 1
 - Fever and nonspecific constitutional symptoms
 - Positive tourniquet test is only hemorrhagic manifestation
- Grade 2
 - Grade 1 manifestations + spontaneous bleeding
- Grade 3
 - Signs of circulatory failure (rapid/weak pulse, narrow pulse pressure, hypotension, cold/ clammy skin)
- Grade 4
 - Profound shock (undetectable pulse and BP

Danger Signs in Dengue Hemorrhagic Fever

- Abdominal pain intense and sustained
- Persistent vomiting
- Abrupt change from fever to hypothermia, with sweating and prostration
- Restlessness or somnolence



Warning Signs for Dengue Shock

Four Criteria for DHF:

- Fever
- Hemorrhagic manifestations
- Excessive capillary permeability
- ≤ 100,000/mm³ platelets

Initial Warning Signals:

- Disappearance of fever
- Drop in platelets
- Increase in hematocrit

Alarm Signals:

- Severe abdominal pain
- Prolonged vomiting
- Abrupt change from fever
 - to hypothermia
- Change in level of consciousness
 (irritability or somnolence)

When Patients Develop DSS:

 3 to 6 days after onset of symptoms



Signs and Symptoms in 57 Hospitalized Cases of DHF, Puerto Rico, 1990 - 1991

SIGNS AND SYMPTOMS	FREQUENCY*	PERCENT
Fever	57	100 %
Rash	27	47.4%
Hepatomegaly	6	10.5%
Effusions	3	5.3%
Frank shock	3	5.3%
Coma	2	3.5%
Any hemorrhage**	57	100 %

^{*} Minimum estimate, search was not uniform for all patients



^{**} Only 2 (3.5%) cases had severe hemorrhagic manifestations

Hemorrhagic Signs and Symptoms in 57 Hospitalized Cases of DHF, Puerto Rico, 1990 - 1991

SIGNS & SYMPTOMS	FREQUENCY*	PERCENT**
Microscopic hematuria	28	51.9%
Petechiae	26	45.6%
Epistaxis	13	22.8%
Gingival hemorrhage	8	14.0%
Blood in stools	8	14.0%
Positive tourniquet test	5	31.3%

^{*} Minimum estimate; the search was not uniform for all patients



^{**} Percents were calculated using the number of patients among whom each symptom was sought as the denominator

Hemorrhagic Signs and Symptoms in 57 Hospitalized Cases of DHF, Puerto Rico, 1990 - 1991

SIGNS & SYMPTOMS	FREQUENCY*	PERCENT
Blood in vomitus	4	7.0%
Bleeding at venipunctu	re 4	7.0%
Hemoptysis	3	5.3%
Vaginal hemorrhage	2	3.5%
Gross hematuria	2	3.5%
Other hemorrhage**	2	3.5%

^{*} Minimum estimate; the search was not uniform for all patients



^{**} Only 2 (3.5%) cases had severe hemorrhagic manifestations

Clinical Laboratory Analyses in 57 Hospitalized Cases of DHF, Puerto Rico, 1990 - 1991

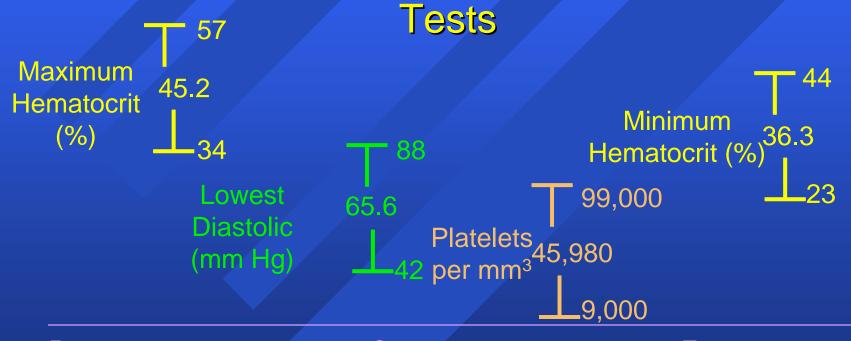
Test with Abnormal Result	Frequency*	Mean Result (Range)
Thrombocytopenia Platelet count Increased Capillary Permeabi	57/57 (100%) ity	45,980 (9 - 99,000)
Hemoconcentration ≥ 0.20 Low serum protein Low serum albumin	34/57 (59.6%) 18/51 (35.3%) 35/52 (67.3%)	6.3 (3.8 - 8.3)



^{*} Average result in the tested cases

Profile of the Progression of Illness

Mean Days from Onset of Symptoms, and Mean Value (± 2 SD) of Selected Clinical



Average admission - day 4.5 DAYS AFTER ONSET Average discharge - day 11 Puerto Rico, 1990-1991 (N=57 patients)



Unusual Presentations of Severe Dengue Fever

- Encephalopathy
- Hepatic damage
- Cardiomyopathy
- Severe gastrointestinal hemorrhage

